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INFO RUEHNE/AMEMBASSY NEW DELHI 0077  
RUEHKT/AMEMBASSY KATHMANDU 9218  
RUEHIL/AMEMBASSY ISLAMABAD 1774  
RUEHLM/AMEMBASSY COLOMBO 8040  
RUEHGO/AMEMBASSY RANGOON 2567  
RUEHCI/AMCONSUL KOLKATA 0862  
RUEHPH/CDC ATLANTA  
RUEKJCS/SECDEF WASHINGTON DC//ISA/NESA  
RUEKDIA/JOINT STAFF WASHINGTON DC//J2/J5  
RHHMUNA/CDR USPACOM HONOLULU HI//J2/J4/J5

UNCLAS SECTION 01 OF 02 DHAKA 001263

SIPDIS

SENSITIVE  
SIPDIS

DEPARTMENT PLEASE PASS TO AIAG/HOLLIS SUMMERS, AIAG/TONY NEWTON AND  
AIAG/NICHOLAS STUDZINSKI  
DELHI PLEASE PASS TO FAS/OLIVER FLAKE

E.O. 12958: N/A

TAGS: [TBIO](#) [KFLU](#) [ELAB](#) [PREL](#) [PGOV](#) [BG](#)

SUBJECT: BANGLADESH AI WORKING GROUP UPDATE

REF: (A) KOLKATA 227, (B) DHAKA 1221, (C) DHAKA 1157, AND PREVIOUS

11. (SBU) SUMMARY. With the pace of the outbreak's spread slowing over the past month, post's Avian Influenza (AI) Working Group met to share updated information about coordination between GOB ministries, between USG agencies, and between USG and GOB entities. While there has not yet been a confirmed human case of H5N1 in Bangladesh, coordination between Bangladesh's Ministries of Health and of Fisheries and Livestock still needs work. Human health surveillance and diagnostic laboratory capacity are rapidly improving, but GOB resources are strained and the majority of improvement is coming from NGO sector such as ICDDR,B. USAID continues to expand its in-country resources, including the hiring or arrival in the near future of experts in epidemiology, logistics, and communications support under the administration of a newly created position of in-country USAID AI coordinator. Additional information and resources are available on post's AI webpage, <http://10.208.1.12/dhkavianinfluenza.htm>. END SUMMARY.

12. (U) FOUR MONTHS INTO THE H5N1 OUTBREAK. Bangladesh's first public announcement of H5N1 in poultry was made March 22, 2007. From then to July 25, 2007, 173,163 farms and 161,834,109 birds have been inspected. H5N1 was confirmed on 52 farms in 17 of Bangladesh's 64 districts, resulting in 240,169 birds culled from the 52 infected and an additional 23 surrounding farms. No human cases of H5N1 infection have been confirmed. The GOB has implemented compensation plans for culled farmers (ref C), which seems to be generally effective. Geographically, nine of the 17 infected districts share borders with India, but are on the opposite, western, side of Bangladesh, away from the recently reported Indian outbreak (ref A).

13. (U) HUMAN SURVEILLANCE CAPACITY. The International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) is an international health research institution supported in part by the U.S. Centers for Disease Control (CDC). ICDDR,B has established itself as a leader in human influenza surveillance in Bangladesh through a population based study since 2004, which provides substantial baseline data. Recently, ICDDR,B and the GOB Ministry of Health implemented a national hospital surveillance program focusing on identifying, documenting, and sampling patients with severe respiratory disease. The program is currently operating in eight hospitals, and expects to expand to 12 by the end of August, 12007. ICDDR,B is also adding substantial laboratory capacity to analyze the samples flowing from that program. Biosafety Level 2

and 3 laboratories for human samples should become operational by September 1, 2007 and January 1, 2008 respectively. ICDDR,B hopes to subsequently branch out into veterinary testing; to avoid laboratory contamination, however this will require a separate level 2 facility for the veterinary samples. ICDDR,B has also received a CDC grant to examine the effectiveness of oseltamivir phosphate (Tamiflu) against the spread of influenza virus in densely populated areas such as Bangladesh.

¶4. (SBU) COMMUNICATIONS AND OUTREACH. The working group discussed a proposal from Voice of America (VOA) to fund additional reporting on AI, and workshops held in conjunction with listener clubs in Bangladesh. UNICEF has the lead on communication strategies, and has been working with the GOB in presenting media products. Additionally, USAID's global partner for communications, AED, has a team evaluating Bangladesh currently. Therefore, the working group suggested that the VOA proposal be coordinated with UNICEF and USAID/AED.

¶5. (SBU) DOD RESOURCES. USAID and post's Office of Defense Cooperation continue to work together in developing programs for DOD / PACOM humanitarian assistance resources in two key areas: Personal Protective Equipment (PPE) and laboratory capacity. USAID is completing a logistics evaluation of the GOB's ability to manage the receipt, storage and distribution of DOD-provided PPE if PPE were to be ordered and delivered. Following that evaluation, USAID will be able to ensure that DOD donated PPE would not overload the already overburdened GOB logistics system and instead would get to where it needs to go. USAID and DOD are also discussing possible funding to outfit the GOB's central veterinary investigative lab with Real-time RT-PCR, which would improve detection of H5 prior to sending sampling to outside reference laboratories.

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¶6. (SBU) USAID IMPLEMENTS ITS ACTION PLAN. USAID has begun increasing its in-country footprint by adding experts to support GOB efforts in areas such as epidemiology, surveillance, laboratory operations, and training on donated equipment as set out in its Highly Pathogenic Avian Influenza Action Plan 2007. Staff continues to be replenished over the summer transfer season, including Jo Lesser who has arrived at post to take up the position vacated by MacDonald Homer in the Economic Growth, Food and Environment section. Also, the hiring process for the new, full-time USAID AI coordinator for Bangladesh is now underway.

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